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02/16/05 WED 13:48 FAX

16158

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, we hereby declare that:

Our residence, post office address and citizenship are as stated below next to my name.

We believe that we are the original, first and joint inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled THE USE OF BACTERIAL PHAGE ASSOCIATED LYSING ENZYMES FOR TREATING VARIOUS ILLNESSES, the specification of which:

(check one) is attached hereto

being filed on _____ as

Application Serial No. _____ and

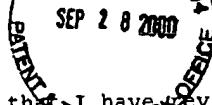
was amended on _____

(if applicable)

jc781 U.S. PTO



SEP 28 2000



09/28/00

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

Priority Claimed

(NUMBER)	(COUNTRY)	(DAY/MONTH/YEAR FILED)	<input type="checkbox"/>	<input type="checkbox"/>	YES NO
(NUMBER)	(COUNTRY)	(DAY/MONTH/YEAR FILED)	<input type="checkbox"/>	<input type="checkbox"/>	YES NO
(NUMBER)	(COUNTRY)	(DAY/MONTH/YEAR FILED)	<input type="checkbox"/>	<input type="checkbox"/>	YES NO

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §156(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

09/497,495
(APPLICATION SERIAL NO.)

04/18/2000
(FILING DATE)

Notice of Allowance
(STATUS)
(PATENTED, PENDING, ABANDONED)

09/395,636
(APPLICATION SERIAL NO.)

03/14/99
(FILING DATE)

Patented
(STATUS)
(PATENTED, PENDING, ABANDONED)

08/962,523
(APPLICATION SER. NO.)

03/31/97
(FILING DATE)

Patented
(PATENTED, PENDING, ABANDONED)

POWER OF ATTORNEY: As a named inventors, we hereby appoint the following attorneys and/or agents to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

SEND CORRESPONDENCE TO:

Jonathan E. Grant
Grant Patent Services
2120 L Street
Suite 210
Washington, D.C. 20037

DIRECT TELEPHONE CALLS TO:

Jonathan E. Grant
(301) 603-9071

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I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or document or any patent issuing thereon.

Full name of sole or
first inventor

LAST NAME	MIDDLE NAME	FAMILY NAME
Flachetti		

Inventor's signature

LAST NAME	MIDDLE NAME	FAMILY NAME
Flachetti		

Date of signature

LAST NAME	MIDDLE NAME	FAMILY NAME
Flachetti		

Residence

LAST NAME	MIDDLE NAME	FAMILY NAME
Flachetti		

Citizenship

LAST NAME	MIDDLE NAME	FAMILY NAME
Flachetti		

Post Office Address

LAST NAME	MIDDLE NAME	FAMILY NAME
Flachetti		

(Insert complete mailing

LAST NAME	MIDDLE NAME	FAMILY NAME
Flachetti		

address, including country)

LAST NAME	MIDDLE NAME	FAMILY NAME
Flachetti		

Full name of second
inventor

LAST NAME	MIDDLE NAME	FAMILY NAME
Leomis		

Inventor's signature

LAST NAME	MIDDLE NAME	FAMILY NAME
Leomis		

Date of signature

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Leomis		

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